

STATE OF CALIFORNIA
DEPARTMENT OF FOOD AND AGRICULTURE
DIVISION OF MEASUREMENT STANDARDS
www.cdfa.ca.gov/dms or e-mail DMS@cdfa.ca.gov
**MOTOR OIL SALES OR PURCHASE
AND ASSESSMENT FEE RETURN**

| | | |
|-----------------|-------|-----|
| Company Name | | |
| Contact Person | | |
| Mailing Address | | |
| City | State | Zip |

| | |
|--------------------------|-----------------------|
| <input type="checkbox"/> | First Time Applicant |
| <input type="checkbox"/> | Established Applicant |

FOR QUARTER ENDING

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Required by Section 13431, Article 4, Chapter 14 of the California Business and Professions Code and Chapter 8, Title 4 of the California Code of Regulations to be filed quarterly by all Motor Oil Dealers. Please fill out this form and sign it. If no sales/purchases were made during the quarter, mark "NONE". Make a copy for your records. Mail original with proper remittance to:

DEPARTMENT OF FOOD AND AGRICULTURE
ATTN: CASHIER, P.O. BOX 942872, SACRAMENTO, CA 94271-2872
MAKE REMITTANCE PAYABLE TO: CDFA 55001

TOTAL ASSESSABLE SALES/PURCHASES IN GALLONS

| FIRST | SECOND | THIRD | TOTAL FOR QUARTER |
|-------|--------|-------|-------------------|
| | | | |

TOTAL GALLON SALES / PURCHASES FOR QUARTER _____ X .02 = \$ _____
(2.0 cents)

PENALTY OF 10% OF AMOUNT DUE IF NOT MAILED WITHIN
ONE CALENDAR MONTH AFTER END OF QUARTER
(Required by Section 13433 of the Business and Profession Code)

\$ _____

TOTAL AMOUNT SUBMITTED HEREWITH

\$ _____

*I CERTIFY UNDER PENALTY OR PERJURY THAT THE INFORMATION
CONTAINED IN THIS REPORT IS TRUE AND CORRECT.*

NAME OF AUTHORIZED REPRESENTATIVE
(PLEASE PRINT OR TYPE)

OFFICIAL TITLE



SIGNATURE OF AUTHORIZED REPRESENTATIVE

DATE

TELEPHONE NO.

For Office Use Only:

Postmark Date: _____

Quarter: Fiscal Year: